

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 6	
1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE07-00-D-M001			2. DELIVERY ORDER/CALL NO. 0255		3. DATE OF ORDER/CALL (YYYYMMDD) 2004JAN28		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DOA4		
6. ISSUED BY TACOM WARREN BLDG 231 AMSTA-AQ-AHLC KATHLEEN PAPPAGEORGE (586)574-8054 WARREN, MICHIGAN 48397-5000 EMAIL: PAPPAGEK@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE W56HZV	7. ADMINISTERED BY (If other than 6) DCMA HUNTSVILLE BIRMINGHAM GROUP BURGER PHILLIPS CENTER 1910 THIRD AVE. NORTH, RM 201 BIRMINGHAM, AL 35203-2376 SCD: C PAS: NONE ADP PT: HQ0338				CODE S0101A	8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR CAMBER CORPORATION 635 DISCOVERY DR NW HUNTSVILLE, AL. 35806-2801 NAME AND ADDRESS TYPE BUSINESS: Large Business Performing in U.S.			CODE OMWW4	FACILITY	10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE			11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED			
12. DISCOUNT TERMS			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15			14. SHIP TO SEE SCHEDULE			15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264		
16. TYPE OF ORDER DELIVERY/CALL <input checked="" type="checkbox"/> X PURCHASE			THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT. Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.								
<div style="display: flex; justify-content: space-between;"> NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYYYMMDD) </div> <div style="margin-top: 10px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: </div>											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE											
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Cost-Plus-Fixed-Fee KIND OF CONTRACT: System Acquisition Contracts									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA JUDITH K. BUSH /SIGNED/ BUSHAJ@TACOM.ARMY.MIL (586)574-7041 BY: _____ CONTRACTING/ORDERING OFFICER				25. TOTAL \$420,374.86		26. DIFFERENCES	
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED _____											
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS			31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.									34. CHECK NUMBER		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER							35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-00-D-M001/0255 MOD/AMD	Page 2 of 6
Name of Offeror or Contractor: CAMBER CORPORATION		

SUPPLEMENTAL INFORMATION

PROGRAM: OMNIBUS PROGRAM & ENGINEERING SUPPORT SERVICES

CONTRACT: DAAE07-00-D-M001/0245 OPT YR 4

PURPOSE OF ORDER: Program support for PM-FCS

TOTAL AMOUNT: \$420,374.86

1. This action is Task Order number 0255 issued pursuant to Contract DAAE07-00-D-M001.
2. The purpose of this order is to exercise an option for 4,428 hours pursuant to Special Provisions H.1.4. This order will provide risk management support to PM FCS.
3. This is a unilateral order for 4,428 man-hours of level of effort, awarded on Cost Plus Fixed Fee basis in the amount of \$420,374.85. This includes \$399,828.94 cost and \$20,545.92 fixed fee.
4. The Contractor shall perform this order 0255 in accordance with the Scope of Work in Section C and Work Directive CAM-0255.
5. The period of performance is from date of award through 28 Feb 05.

6. PAYMENT

The contractor shall submit monthly invoices for payment for work performed in the previous month.

7. INVOICE INSTRUCTIONS

In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract. On each billing document prepared by the contractor, the CLIN/SUBCLIN applicable to that billing shall be specified. Where there is one ACRN applicable to the particular CLIN/SUB/CLIN being billed, the ACRN shall be specified as well.

8. PAYMENT INSTRUCTIONS FOR DFAS

- a. In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract.
- b. The paying office shall pay each invoice only with the funds obligated under the CLIN/SUBCLIN specified on the voucher. Payments shall be made first from the oldest funds by fiscal year applicable to each individual CLIN. The oldest funds shall be disbursed in their entirety before proceeding to disburse the next ACRN.

Name of Offeror or Contractor: CAMBER CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT								
	SUPPLIES OR SERVICES AND PRICES/COSTS												
0001	SECURITY CLASS: Unclassified												
0001AA	<div>SERVICES LINE ITEM</div> <div>NOUN: FY04 MSI RISK ASSESSMENT SPT PRON: BU4GFMD1BU PRON AMD: 01 ACRN: AA AMS CD: 654645F5700 NOUN: To provide risk management support to PM FCS Level of Effort: 4,428 man hours WD: CAM-255 Estimated Cost: \$399,828.04 Fixed Fee: \$ 20,545.02 Total Estimated Cost: \$420,374.86 (End of narrative B001) <u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination <u>Deliveries or Performance</u><table><tr><td>DLVR SCH</td><td></td><td>PERF COMPL</td></tr><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>28-FEB-2005</td></tr></table><div>\$ 420,374.86</div></div>	DLVR SCH		PERF COMPL	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	28-FEB-2005		HR	\$ 420,374.86
DLVR SCH		PERF COMPL											
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>											
001	0	28-FEB-2005											

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-00-D-M001/0255 MOD/AMD	Page 4 of 6
Name of Offeror or Contractor: CAMBER CORPORATION		

DELIVERIES OR PERFORMANCE

F.1 Period of Performance

Period of performance for the work set forth in WD CAM-0255 is date of award through 28 Feb 05.

*** END OF NARRATIVE F 001 ***

CONTINUATION SHEET

Reference No. of Document Being Continued

Page 5 of 6

PIIN/SIIN DAAE07-00-D-M001/0255

MOD/AMD

Name of Offeror or Contractor: CAMBER CORPORATION

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>	OBLG <u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB <u>ORDER</u> <u>NUMBER</u>	<u>ACCOUNTING</u> <u>STATION</u>	<u>OBLIGATED</u> <u>AMOUNT</u>
0001AA	BU4GFMD1BU 654645F5700	AA	2	21 42040000045R5R06P654645255Y S20113	4GFMD1	W56HZV \$	420,374.86
						TOTAL \$	420,374.86

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	21	42040000045R5R06P654645255Y	S20113		W56HZV	\$ 420,374.86
						TOTAL	\$ 420,374.86

CONTINUATION SHEET	Reference No. of Document Being Continued	Page 6 of 6
	PIIN/SIIN DAAE07-00-D-M001/0255 MOD/AMD	
Name of Offeror or Contractor: CAMBER CORPORATION		

LIST OF ATTACHMENTS

<u>List of Addenda</u>	<u>Title</u>	<u>Date</u>	<u>Number of Pages</u>	<u>Transmitted By</u>
Attachment 001	DD FORM 254/DAAE0700DM001/0255	13-JAN-2004	004	EMAIL
Attachment 002	ATTACHMENT "A"	13-JAN-2004	001	EMAIL
Attachment 003	ATTACHMENT "B"	13-JAN-2004	002	EMAIL
Attachment 004	ATTACHMENT "C"	13-JAN-2004	002	EMAIL